

## VILLAGE OF BRIGHTON APPLICATION FOR BUSINESSS LICENSE/REGISTRATION

BUSINESS INFORMATION				License # Issued:
Business Name:				Email:
Business Address: Street	City	State	zip	Business Phone:
Business Type:				Sales Tax # and Classification:
Years In Business:	0	Hours of peration:		Insurance Co.:
Zoned:	Signage:	YES NO	)	County Business License #:
APPLICANT INFORMATION				
Name:				Phone:
Address: Street City	State	Zip		Citizenship:
Length at above address:		DOB:		SS#:
Residences for the last 3yrs if different from above:				
Have you ever been convicted of a felony? YES NO				
List last 3 municipalities where applicant has carried on business:				
Have you ever had a license in the Village of Brighton? YES NO When:				
Have you ever had a license revoked? YES NO If 'yes', explain:				
County Health Dept. Inspection Must Accompany This Application (If selling food items)				
I agree to keep my business in a safe condition by maintaining any and all buildings, keeping it free from accumulation of refuse, waste, and junk, stored wastepaper, cartons, boxes, and other flammable material. I agree to clean and sanitary conditions, free from flies, rodents, vermin, insects, decaying animal or plant matter. The business shall be kept in good repair so that persons are not injured by reason of any defects, unsafe or dangerous conditions, or substance or thing that would be dangerous to the health and safety of the public.				
SIGNATURE of APPLICANT				Date:
\$50.00 BUSINESS LICENSE FEE-Payable to the Village of Brighton				
License shall expire on June 3	0th, 2026	•		
Zoning Inspector Signature (New Applications Only)				Date: